## 2006 LIMITED LIABILITY COMPANY

## **FILED ANNUAL REPORT** Apr 12, 2006 08:00 AM DOCUMENT # L04000029715 **Secretary of State** YALE'S LAWN MAINTENANCE, L.L.C. Principal Place of Business Mailing Address 8965 INDIAN FORD ROAD 8965 INDIAN FORD ROAD MILTON, FL 32570 MILTON, FL 32570 03152006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 02-0545350 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent YALE, PHILIP E DO NOT WRITE 8965 INDIAN FORD ROAD MILTON, FL 32570 IN THIS SPACE 8. The above named entity submits this statement for the purpose of manging its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accept the obligations of registered agent. (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGR THE YALE, PHILLIP E U80000505177 84/26/06-80107-004 50.00 STREET ADDRESS 8965 INDIAN FORD ROAD CITY-ST-ZIP MILTON, FL 32570 THILE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-77P THILE STREET ADDRESS

11. I hereby certify that the information supplied with this fiting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiper of true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiper of true accurate this period as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET AUDRESS CITY-ST-ZIP

850-450-220